

Work Order ID 98317

98317

Page 1

March-12-13 1:46:54 PM

Item ID: D3935-1

Accept

N900040100

Setup

Start

NS1

Revision ID:

Stop

NS2

Item Name: Pylon Wall Protector, LH

Start Date: 3/19/13 Start Qty: 1.00

1

Cust Item ID:

Required Date: 3/22/13 Req'd Qty: 1.00

1

Customer:

Reference:

Approvals: Process Plan: MLJ

Date: 13-03-14

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/ Work Center ID	Operation Description	Set Up/ Run Hours	Tool ID	Tool #	Plan Code	Accept Qty	Reject Qty	Reject Number	Insp. Stamp
--------------------------------	--------------------------	----------------------	---------	--------	--------------	---------------	---------------	------------------	----------------

Draw Nbr	Revision Nbr
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D3935	B
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100	
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100 Waterjet	Memo
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FLOW CNC Waterjet	1-Cut as per Dwg D3935 Dwg Rev: <u>B</u> Prog Rev: <u>B</u>
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110	2- Deburr if necessary
-----	------------------------

QC2- Inspect parts off machine FAI/FAIB	0.00
---	------

110 QC	Memo
--------------------	------

Quality Control	0.00
-----------------	------

1 0 Jm 13-4-8

1 0 Jm 13-4-8

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio			<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions				
							<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge			<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled	
										<input type="checkbox"/> Other	

Work Order ID 98317

March-12-13 1:46:54 PM

98317

Page 2

Item ID: D3935-1

Accept

N900040100

Setup

Start

NS1

Revision ID:

Item Name: Pylon Wall Protector, LH

Start Date: 3/19/13 Start Qty: 1.00 *1*

Cust Item ID:

Required Date: 3/22/13 Req'd Qty: 1.00 *1*

Customer:

Reference:

Approvals:

Process Plan:

Date:

Tooling:

Date:

Run

Start

NR1

QC:

Date:

SPC (Y/N):

Date:

Stop

NR2

Sequence ID/
Work Center ID

Operation
Description

Set Up/
Run Hours

Tool ID

Tool #

Plan
Code

Accept
Qty

Reject
Qty

Reject
Number

Insp.
Stamp

120

120

QC

Quality Control

QC8- Inspect parts - second check

0.00

AS
21
B49

1

130

130

Packaging

Packaging

Identify as per dwg & Stock Location:

0.00

Memo

PPF 99132

0.00

R 13/4/2010

140

140

QC

Quality Control

QC21- Final Inspection - Work Order Release

0.00

Memo

0.00

13/5/4/2010

PL (3-04-30)

DQA: _____ Date: _____

NCR: Yes / No

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION			AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>				
			Scrap <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>				
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>				
			Work Order Update <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											
FAULT CATEGORY											
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions							
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other							
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled							

Picklist Print

March-12-13 1:46:53 PM

Page 1

Work Order ID: 98317

Parent Item: D3935-1

Parent Item Name: Pylon Wall Protector, LH

Start Date: 3/19/13

Required Date: 3/22/13

Start Qty: 1.00

Required Qty: 1.00

Comments:

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
MLEXS.125-F60029-04 GE PLASTICS LEXAN SHEET		Purchased	No			100	sf	2,330.6640	8.69	2,147.3684 10		Jm B-4-8	

Location	Loc Qty	Loc Code
MAT018	2330.664	
124654	666.664	
124866	1664	124654

NCR: Yes / No

DQA: _____ Date: _____

WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: _____ Date: _____

Work Order: _____			DISPOSITION		AGAINST DEPARTMENT/PROCESS					
			Rework <input type="checkbox"/>	Scrap <input type="checkbox"/>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>		
			Use-as-is <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coor. <input type="checkbox"/>	Quality <input type="checkbox"/>		
Part No. _____			Work Order Update <input type="checkbox"/>		Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Supplier <input type="checkbox"/>		
NCR No. _____					Large Fab <input type="checkbox"/>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector	
Doc/Data										
Equip/Tooling										
Operator										
Material										
Setup										
Other										
Process										
Supplier										
Training										
Unapproved										
FAULT CATEGORY										
Landing Gear <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped. <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				General <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions						
				<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge <input type="checkbox"/> Other						
				<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled						

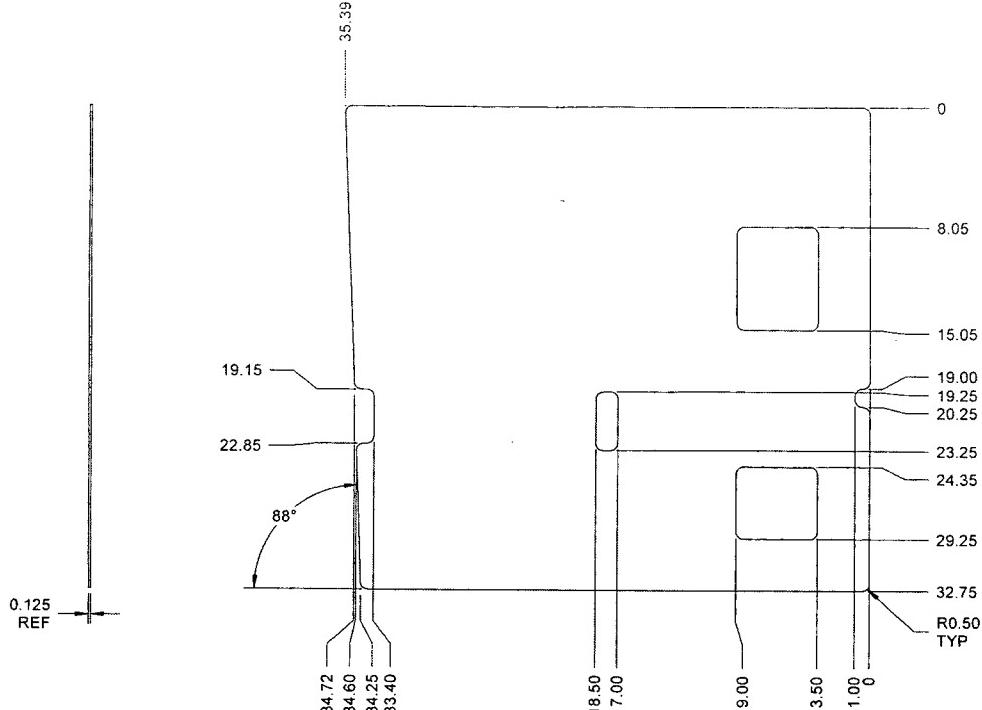
DART AEROSPACE LTD	Work Order:	98317
Description: Pylon Wall Protector, LH	Part Number:	D3935-1
Inspection Dwg: D3935 Rev: B		Page 1 of 1

FIRST ARTICLE INSPECTION CHECKLIST

25

Measured by:	JM	Audited by:	27 9-0	Preliminary Approval:	N/A
Date:	13-4-8	Date:	13-4-9	Date:	N/A

Rev	Date	Change	Revised by	Approved
A	09.06.22	New Issue	KJ	
B	10.08.18	Dwg Rev updated	KJ	



SHO
R3
UNCONTRACTED COPY
SUBJECT: ~~CONFIDENTIAL~~
WITH ATTACHMENT
MURKIN, R.
NO. 78317 MLS
13-03-14

RELEASED
2009-10-22
[Signature]

D3935-1 PYLON WALL PROTECTOR, LH
(TEXTURED SIDE SHOWN)

NOTES:

- 1) MATERIAL: F60029-GY3778 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE) 0.125 THICK
REF DART MLEXS.125-F60029-04

2) FINISH: N/A

3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED

4) UNITS: INCHES UNLESS OTHERWISE NOTED

5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX

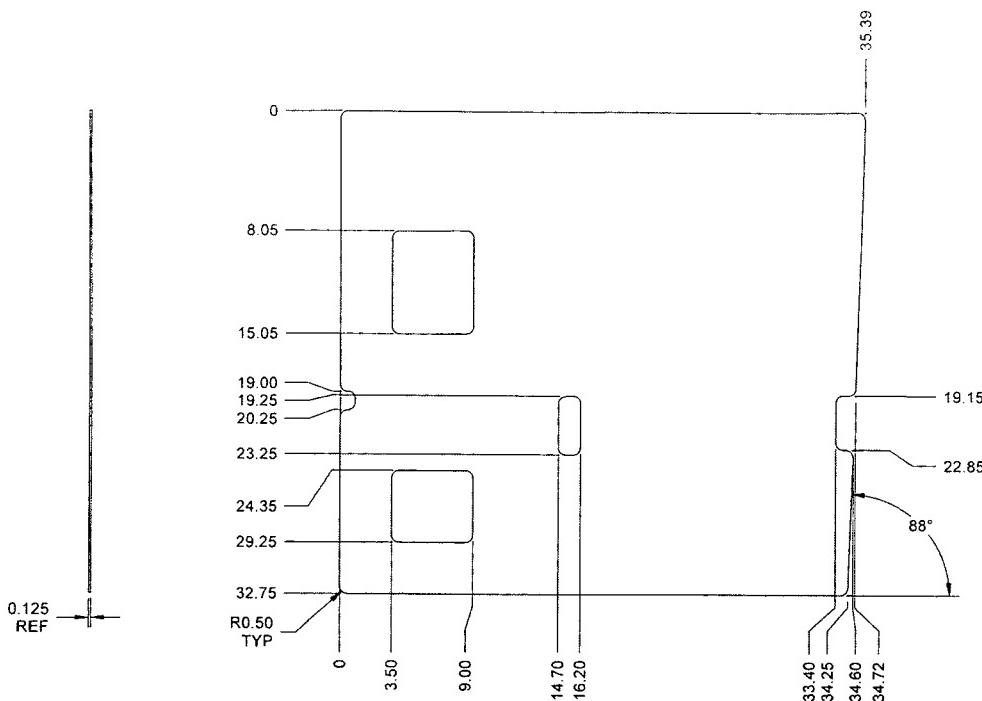
6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3935-1" AND B/N USING FINE POINT PERMANENT INK MARKER

7) WEIGHT: 5.79 lbs

8) CHECK PER TEMPLATE DT8922

B	ADD -3, -4 (SHEET 3, 4)			09.08.19
A	NEW ISSUE		HS	09.08.21
REV.	DESCRIPTION		BY	DATE
DESIGN	DART AEROSPACE LTD			
DRAWN	HAWKSBURY, ONTARIO, CANADA			
CHECKED	DRAWING NO.		REV. B	
MFG. APPR.	D3935		SHEET 1 OF 4	
APPROVED	TITLE		SCALE	
DE APPR.	PYLON PROTECTOR		INTS	
DATE	09.08.19		COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT THE	

98317



D3935-2 PYLON WALL PROTECTOR, RH
(TEXTURED SIDE SHOWN)

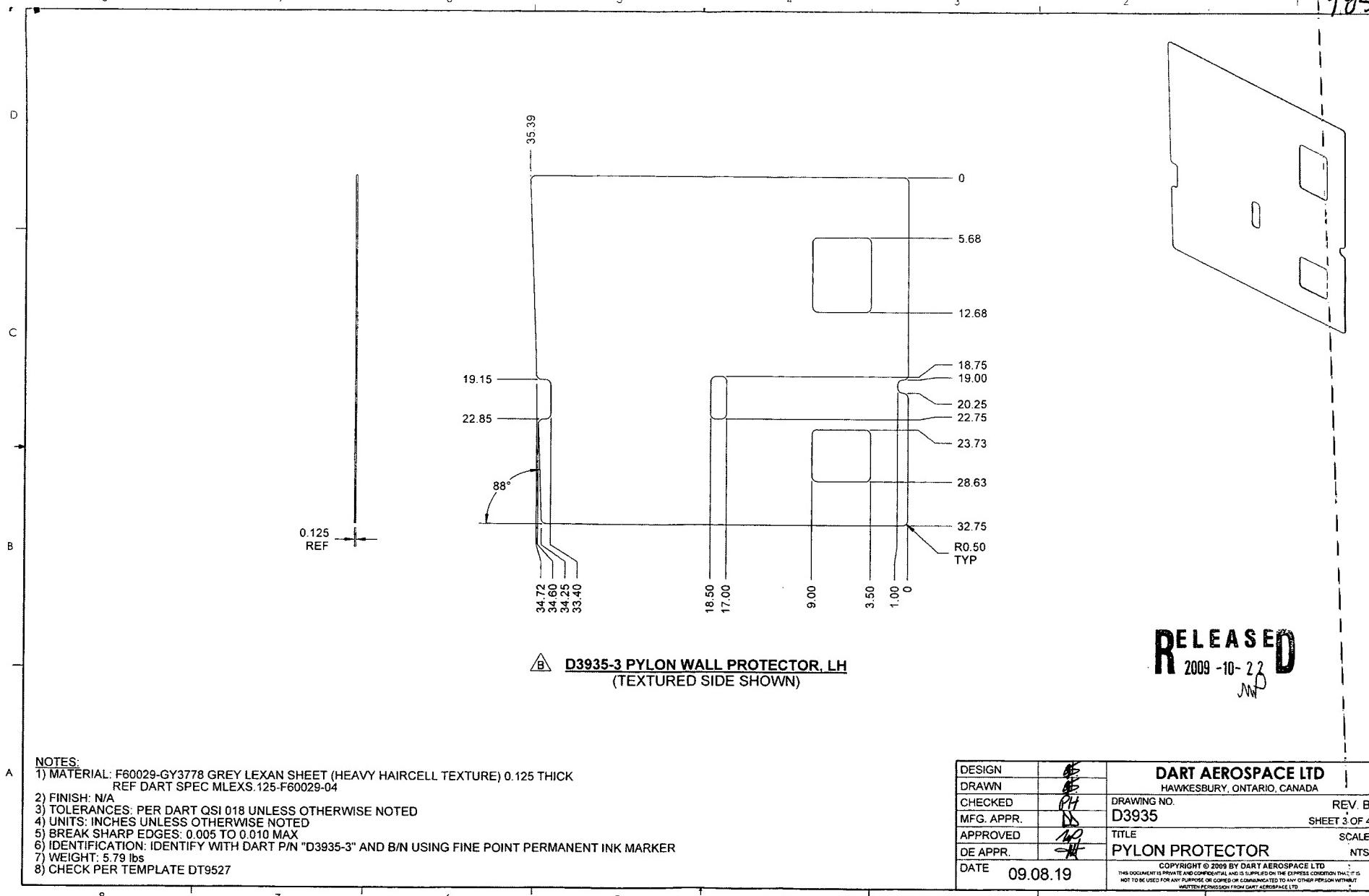
RELEASED
2009-10-23
[Handwritten signature]

NOTES:

- 1) MATERIAL: F60029-GY3778 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE) 0.125 THICK
REF DART SPEC MLEXS.125-F60029-04
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3935-2" AND B/N USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: 5.79 lbs
- 8) CHECK PER TEMPLATE DT8923

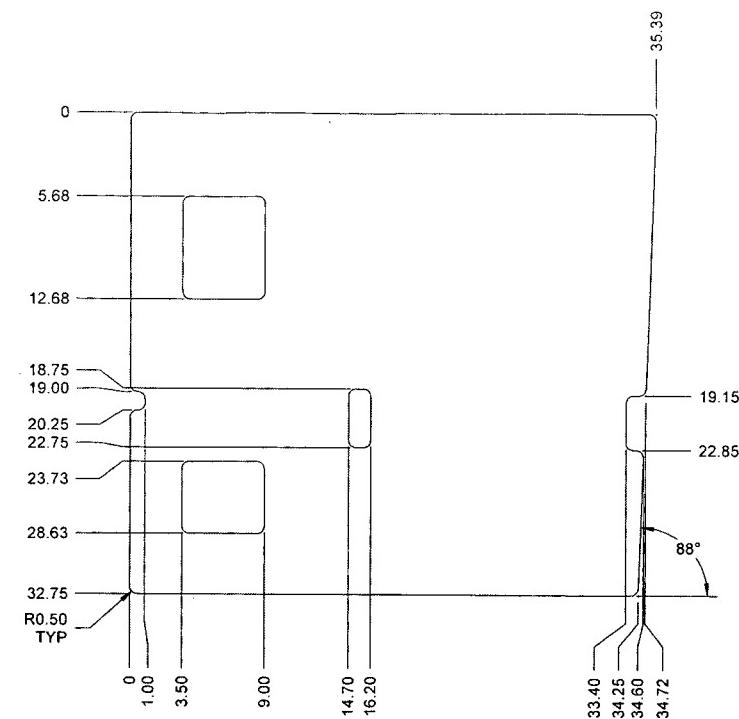
DESIGN	<i>[Signature]</i>	DART AEROSPACE LTD
DRAWN	<i>[Signature]</i>	HAWKESBURY, ONTARIO, CANADA
CHECKED	<i>[Signature]</i>	DRAWING NO. REV. B
MFG. APPR.	<i>[Signature]</i>	D3935 SHEET 2 OF 4
APPROVED	<i>[Signature]</i>	TITLE SCALE
DE APPR.	<i>[Signature]</i>	PYLON PROTECTOR NTS
DATE	09.08.19	COPYRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PROPRIETARY INFORMATION OF DART AEROSPACE LTD. IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.

98317



DESIGN	<i>AS</i>	DART AEROSPACE LTD	
DRAWN	<i>AS</i>	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>PH</i>	DRAWING NO.	REV. B
MFG. APPR.	<i>AS</i>	D3935	SHEET 3 OF 4
APPROVED	<i>AS</i>	TITLE	SCALE
DE APPR.	<i>AS</i>	PYLON PROTECTOR	NTS
DATE	09.08.19	COPRIGHT © 2009 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR DISCLOSED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD	

98313



D3935-4 PYLON WALL PROTECTOR, RH
(TEXTURED SIDE SHOWN)

NOTES:

- 1) MATERIAL: F60029-GY3778 GREY LEXAN SHEET (HEAVY HAIRCELL TEXTURE) 0.125 THICK
REF DART SPEC MLEXS.125-F60029-04
- 2) FINISH: N/A
- 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
- 4) UNITS: INCHES UNLESS OTHERWISE NOTED
- 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
- 6) IDENTIFICATION: IDENTIFY WITH DART P/N "D3935-4" AND B/N USING FINE POINT PERMANENT INK MARKER
- 7) WEIGHT: 5.79 lbs
- 8) CHECK PER TEMPLATE DT9528

RELEASED
2009-10-22
JW

DESIGN	<i>AB</i>	DART AEROSPACE LTD	
DRAWN	<i>AB</i>	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>AB</i>	DRAWING NO.	
MFG. APPR.	<i>AB</i>	REV. B	
APPROVED	<i>AB</i>	SHEET 4 OF 4	
DE APPR.	<i>AB</i>	TITLE	SCALE
DATE	09.08.19	PYLON PROTECTOR	
NTS			
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WRITTEN PERMISSION FROM DART AEROSPACE LTD			